	PATEN	TAPPLICAT Effe	ION FEE	DETERMODER 1, 2	MINAT 000	ION REC	ORI		Application	on of	Docket No	imber 12/
	CLAIMS AS FILED - PART I. (Column 1) (Column 2)							SMALL TYPE	ENTITY	View View		R THAN
	OTAL CLAIM	S	. 179 f. X		a.]	RATE		i Oi		LENTITY
F	OR		NUMBE	R FILED	NUM	BER EXTRA	1	BASIC F		٠	RATE BASIC FE	-
TOTAL CHARGEABLE CLAIMS			1/%	ninus 20=	•		1	XS 9=	-	- 0	 	
IN	DEPENDENT	CLAIMS	16-M	minus 3 =		ł			-loi	X\$18=		
М	ULTIPLE DEPE	NDENT CLAIM					X40=		OF	X80=		
-	f the difference	o io ook d :		- Cyler	<u> </u>	<i>Ψ.)</i> []		+135=	,	OF	+270=	270
		e in column 1 is				column 2	•	TOTAL		OF	TOTAL	1270
	(CLAIMS AS (Column 1)	AMENDE					01444		-		THAN
A	, v	CLAIMS	10 to	(Colun	EST	(Column 3)	ı	SMALL	ENTITY	OR 7	SMALL	ENTITY
AMENDMENT	Z w.	REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2	Total	·	Minus	••		=		X\$ 9≃		OR	X\$18=	
AM	Independent	NTATION OF 1	Minus			=		X40=		OR	X80=	
<u> </u>	rinot rhest	NTATION OF M	OLTIPLE DE	PENDENT	CLAIM		t	.105	 	1		
							L	+135= TOTAL		OR	+270=	
		(Column 1)		(Colum	n 2)	(Calumn 0)	A	DOIT. FEE		OR	TOTAL ADDIT. FEE	
В	;	CLAIMS REMAINING	194 4	HIGHE	ST	(Column 3)			1.001	1 1		
MENDMENT B		AFTER AMENDMENT	211	PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
END	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
A	Independent	NTATION OF MU	Minus			=	T	X40=		OR	X80=	
	THE SE	TATION OF MC	LIPLE DE	PENDENT	CLAIM		上	+135=				
							L	TOTAL		OR	+270= TOTAL	
		(Column 1)		(Cal	- 0\		AC	OIT. FEE		OR ,	ADDIT. FEE	
ပ	Table f or the salt leaves of	CLAIMS	v. Alexandre	(Column	ST	(Calumn 3)	_			,		
NOMENT	Pier .	REMAINING AFTER AMENDMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		<u></u>	X\$18=	_ ree_
A P	Independent	<u> </u>	Minus	***		=	\vdash	X40=		OR		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT C	CLAIM		\vdash	/\7U=		OR	X80=	
; II	If the entry in column 1 is less than the entry in column 2, write "0" in column 3,							-13 5=		OR	+270=	
i	If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20. If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3, the Highest Number Previously Paid For (Total or Independent) is the highest number							TOTAL DIT FEE	ALC: Y	OR,	TOTAL DDIT: FEE	de Marine
34.1	in tringuest Mulli	per Previously Paid	For (Total or	Independent	l) ie the t	inhest number	lound	in the app	ropriale box	in colu	mn 1	

CLAIM	S AS FILED - PAR	TI		211	10210
TOTAL CLAIMS	(Column 1)	(Column 2)	SMALL EN	ПТҮ	OTVED
			TYPE	(OTHER TO SMALL EN
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE
TOTAL CHARGEABLE CLAIM	15 22 minus 20=		BASIC FEE		R BASIC FEE
INDEPENDENT CLAIMS	7				-
MULTIPLE DEPENDENT CLAI	M PRESENT		X40=		
	the state of the s		7 1	l ^o	R X80=
If the difference in column 1	l is less than zero, ente	er "0" in column 2	+135=	01	R +270= 3
CLAIMS AS	S AMENDED - PAR	T 11	TOTAL	OF	TOTAL 130
(Column 1) (Colu)		OTHER THA
		EST	7		SMALL ENTI
Total • HEMAINING AFTER AMENDMENT Total • Independent •		DUSLY EXTRA		DDI- DNAL	RATE TIO
Total	Minus **	=		EE	HATE TIOI
Independent •	Minus ***		X\$ 9=	OR	X\$18=
FIRST PRESENTATION OF M	MULTIPLE DEPENDENT	CLAIM []	X40=	OR	X80=
•.			+135=	$\neg \mid \mid$	
•			TOTAL	OR_	+270=
(Column 1) CLAIMS	(Column	12) (Column 3)	ADDIT. FEE	OR _. A	TOTAL DDIT. FEE
REMAINING AFTER	HIGHES NUMBE	B DDF0515	ADD		
AMENDMENT	PREVIOUS PAID FO	SLY EVED.	RATE TION	AL	RATE TIONA
Total *	Minus **	=	FEE	<u> </u>	FEE
ndependent .	Minus ***	.=	X\$ 9=	OR 3	X\$18=
IRST PRESENTATION OF MU	LTIPLE DEPENDENT CL	AIM 🗍	. X40=	OR	X80=
			+135=		070
•			TOTAL		270=
(Column 1) CLAIMS	(Column 2) (Column 3)	ADDIT. FEE	OR ADD	TOTAL DIT. FEE
REMAINING AFTER	HIGHEST NUMBER	PRESENT	100		
AMENDMENT	PREVIOUSLY PAID FOR	EXTRA	ADDI- RATE TIONAL		ADDI- ATE TIONAL
	inus **	=	FEE	<u> </u>	ATE TIONAL FEE
ependent . M	inus ***		X\$ 9=	OR X\$	18=
IST PRESENTATION OF MULT	IPLE DEPENDENT CLAI	MITT	X40=	OR X8	30=
entry in column 1 is less than the en Highest Number Previously Paid Fo Highest Number Previously Paid Fo lighest Number Previously Paid Fo			+135=		
an a coo u au i ina an	IIIV IS AAILIMAM S	column 3. Lan 20, enter "20." All All All All All All All A	1	OR +27	U= I

SERIAL NUMBER 09 76272

TO:	
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OFFICE OF FINANCE

FROM:

CRYSTAL PLAZA 2, LOBBY

PLEASE PROCESS THE FOLLOWING COLLECTIONS:

	ocess the follow	AING COLLECTIONS:		
FEE CODE	AMOUNT	FEE CODE	AMOUNT	
BASIC FEE		CLAIMS/MU	LTIPLE DEPENDENT	
960		964	· · · · · · · · · · · · · · · · · · ·	
961		965		-
970		966	360	<u> </u>
971	 	967		
958		968	,	
959		969	· .	
956			SURCHARGE	
957		154		
962		254		
963		156		
OTHER:		581		
	 		•	
	· 		·	
THE ORIGIN	AL METHOD OF PAY	'MENT		
	BY A CHECK		~	
X	BY A CHARGE TO	DEPOSIT ACCOUNT NO.	03-3975	
DO/EO FEE	,		√ I	iaritta A. Burt Iralegal Specialist

SERIAL NUMBER 09/762

TO:	

OFFICE OF FINANCE

FROM:

CRYSTAL PLAZA 2, LOBBY

PLEASE PROCESS THE FOLLOWING COLLECTIONS:

The second secon							
FEE CODE	AMOUNT	FEE CODE	AMOUNT				
BASIC FEE		CLAIMS/MUL	TIPLE DEPENDENT				
960	-	964	<u> </u>				
961		965	-				
<u>970</u>		<u>966</u>					
971		967	—— n —				
958		968	210				
959		<u>969</u>					
<u>956</u>		LATE FEES/S	URCHARGE				
957		154	· '				
962	***************************************	254					
963		<u> 156</u>					
OTHER:		581					
	,						
THE ORIGINAL METHOD OF PAYMENT							
	BY A CHECK						
$\overline{}$			2 200				
	BY A CHARGE TO DI	EPOSIT ACCOUNT NO. 🛭	13/11/5				
DO/EO FEE			Charitta A. Burt Paralegal Specialist				